



## **FINAL Meeting Minutes - Special DECC Meeting**

**June 12, 2018**

**10:30 AM to 12:30 PM**

Colwyck Center – Resource Room

### **Attendance:**

Gwen Angalet, United Way of Delaware; Jacqueline Jenkins, United Way of Delaware; Jeannette Short, Office of Early Learning; Kelly Sherretz, University of Delaware; Jamie Walko, Office of Early Learning; Shebra Hall, DHSS; Ray Fitzgerald, DHSS; Mary Moor, DPH; Leslie Newman, Children and Families First; Michelle Shaivitz, DEAEYC; Heidi Beck, DE Head Start; Diane Frentzel, Delaware Readiness Teams; Maryann Kozel, Colonial School District; Jackie Bense, DHSS; Regina Sidney-Brown, United Way of Delaware; Rosanne Griff-Cabelli, DHSS; Mary Hirschbiel, Read Aloud Delaware; Daphne Evans, DPH; Caitlin Gleason, Office of Early Learning; Julie Johnson, Tender Love Kare Child Care & Learning Centers; Dawn Alexander, Colonial School District; Nanci Hersh, Delaware Institute for Arts in Education; Katrina Daniels, Colonial School District; Gwendolyn Sanders, Wilmington Early Care and Education Council; Kristy Sheffler, University of Delaware; Andria Keating; Babes on the Square; Susan Campbell, DHSS; Takeya Perez, DHSS; Donna Snyder-White, United Way of Delaware; Debbie Taylor, Rowan University; Leann Gibason, Newark Day Nursery; Keira Hall, Colonial School District; Michelle Anderson, Children and Families First; Cheryl Clendaniel, The Learning Center; Lynn Kelley, Children and Families First, Tina Shockley, Office of Early Learning

### **Welcome and Agenda Review**

The group assembled and the meeting began at 10:30 a.m. Madeleine Bayard welcomed everyone and reviewed the meeting agenda.

Jackie Jenkins of United Way of Delaware talked about Campaign for Grade Level Reading (CGLR), specifically their upcoming Subcommittee Meeting on June 18, from 4-6 pm. She encouraged everyone to attend. She also noted July 12 is the official launch of their Summer Learning Campaign. Libraries will be partnering with various summer learning programs to encourage and focus on improving literacy during summer months. Additional details about this will be released at the June 18 meeting.

Next, a presentation was given by Children and Families First, Lynn Kelly and Michelle Anderson entitled, Mapping the Gap: Examining the Child Care Supply & Demand in Delaware (all meeting

materials will be sent to members/attendees with these minutes). They help connect families with data regarding child care. This presentation highlighted the new Delaware maps recently released by Child Care Aware that show child care providers throughout the state. Each map provides a text overview and legend. The map starts out on a statewide level but you can zoom into street level. Each map shows all providers across the state, Star Levels and even providers not in Delaware Stars. When you chose a provider, you can see provider's information in a text box. It is nice that these map allow you to get down to the provider level.

Other highlights included that Delaware is one of 15 states that did this, and was able to customize it to include quality rating levels (DE Stars), and different types of care. It was noted that this is snapshot in time. It displayed general supply and demand of child care, but specific data was collected for infant/toddler child care centers, centers/programs accepting Purchase of Care and a general cost of care.

Also noted that some assumptions were made in the data, i.e., census data was used to indicate where people live vs. providers in zip codes. We know parents don't always use child care in their zip codes. Not all parents use licensed child care. We used only licensed providers in the data for this study (therefore districts were not included). The overall goal of the presentation was to acquaint DECC members with the maps and how to access information, and have them to dig deeper into the data.

The maps are available [here](#) on the Child Care Aware website.

Another presentation was given by the Kelly Sherretz and Haley Qaissaunee of the UD Institute for Public Administration. It was entitled, "Wilmington Community Asset and Resource Mapping Brief." This presentation highlighted a recent analysis of the child care resources available to residents of the City of Wilmington, with the early childhood piece being a small part of the larger project.

Nonprofits and public entities were surveyed, but not private entities, and then mapped in hopes of aligning families with the child care resources.

Maps showed children (under 18 yrs. old) living in poverty, by census track, in various areas of the City of Wilmington. The maps also showed De Stars rating overlaid on the child poverty map. There were apparent gaps in high quality child care in areas where there is high poverty. UD will continue to look at these gaps and research further to see what is needed.

Key findings were:

550 public/nonprofits in City of Wilmington

1095 child care programs offered to families

Biggest issues were health/health care, academics (outside of schools) and housing

A lot of programs were located in City of Wilmington, with Riverside and Eastside showing child living in poverty but with the fewest early childcare centers.

Next steps include doing more intensive analysis in certain areas of the city and provide these maps online as well as a resource guide. UD will work with others across the state to ensure there is no duplicate work, as many people are researching this subject right now.

John Fisher-Klein of the Office of Early Learning provided a presentation on the Community Needs Assessment. This was created as part of the Head Start-Child Care Partnership by WillowTree. A focused group of parents and staff were surveyed, as is required to prioritize the children they enroll in the program. He provided some key statistics about children in Delaware:

- Over 11% of children are living below
- Many children are living in multi-generational homes
- 28% of households are female led, no husband
- 9% of households are male led, no wife
- Almost half 43% of children in Delaware are living below poverty level
- 10% were living in extreme poverty
- Children are living in cars, or families all in one room, or parents working 3+ jobs
- Poorest families are spending 10% of their income on childcare

Key take aways:

- 75% of Head Start families are financially stressed
- 19% are stressed about housing
- Families need most help with depression and/or family conflicts

John noted this data is available by county, and shows that those in Sussex County lag behind compared to others. His complete presentation is available upon request.

Madeleine Bayard asked for input from the attendees on the studies presented. Attendees brought up issues such as:

-Comparative data – do we have anything to compare these studies to? Some of these studies are new such as the Child Care Aware (which is a pilot for Delaware). As for the Head Start Community Needs Assessment, only county ones have been done previously.

-Attendees were surprised by statistics in the Community Needs Assessment that most had phone and internet access. It was clarified that this is “available internet/phone access”, and further clarified that while people have access to it they may not subscribe to it.

-Cost of care continues to come up, with families reaching out to us. They want district early child care so they don’t have to pay for private child care, as families cannot afford child care (ECAP is limited and/or they make too much for Purchase of Care (POC) subsidy).

-Suggestion to increase POC and codify it, and that these should be high priorities for our group.

-What is the demand? What would it take for a waitlist? How many do we have to turn away.....we are working on getting that data with UD

-Can we look at other states to see what they have done to address these issues...increase POC, offer more opportunities in public setting, ECAP capacity? It was suggested that maybe we have someone come and talk about that.

-Non-traditional hours of care needs to be look at thoughtfully as well.

At this point the meeting switched to focus on the Child Care Development Fund. Jackie Bensel of Delaware Health and Social Services gave an overview presentation on the Child Care Development Fund. Her presentation is attached to these minutes. Following Jackie's presentation various issues were discussed relative to the CCDF which are captured below. Madeleine noted Tina would send the written feedback CCDF from the DECC to Takeya (which Tina did).

### **CCDF Feedback Gathered at June 12, 2018 Special DECC Meeting**

The following is feedback received at the June 12, 2018 Special DECC Meeting, where the CCDF Plan was discussed.

#### **What CCDF is/New Plan Contents/Policy Discussion**

The CCDF provides subsidized child care services to all eligible families with a need, and further works to promote quality in the early care and education system.

New Requirements Contained in New Plan include:

- Consumer Education Website
- Criminal Background Checks
- Monitoring of Exempt Providers
- Graduated Phase Out
- 12 Month Eligibility

Quality set-aside/New Federal Resources

Total Funds for POC Program:

CCDF – \$17,566,562

State General Funds - \$30,963,648

Social Services Block Grant- \$987,264

TANF – \$19,279,631

- TOTAL Spend – \$68,797,10
- Number of children served is 190,678
- Quality Set Aside FY17 – 7% , FY18 – 8%,FY 21 9%

#### **Policy Discussion Around POC**

**Copayment Changes Update** – The agency is working with our federal Technical Assistance and Systems Unit to develop a new parent co-pay scale

-Based on gross income level

-Amount set by DHSS, not based on what the providers is charging

Q: Based on assessments that have already been done, people are already paying 10%. By knowing that, will that be a factor on our input?

DHSS A: We are still looking at the fiscal impact to our customers. We need to make sure it's not a hardship on our families. The federal government recommends a 7% limit, but we (in Delaware) still have to look at our fiscal funding.

**Graduated Phase Out – The agency has developed the policy and continues to work on systems enhancements necessary to implement it.**

Q: How is Graduated Phase Out different than 12 month eligibility?

DHSS A: Graduated Phase Out only occurs during redetermination of families' case. DHSS looks at their income eligibility level based on two tiers (entry and exit). If they fall between two levels, they go to the graduated phase out as they are slowly removed from the child care POC program. They have three options at redetermination: Continue on with child care, or go onto graduated phase out, or if they are over income-eligibility level, they close out at redetermination.

Q: In the Graduated Phase Out, are they covered at the same rate?

DHSS A: What they are paying would increase during phase out.

**12 month Eligibility**

Q: Any reason why a child would be determined ineligible?

DHSS A: Per the feds, then we would close out a family from services would be for excessive absences (10 in one month), if they are an intentional program violator or if they permanently move out of state. Additionally this could occur if the family requests closure or if there is a death of the case head or of the child.

Q: For example, does one lump sum of child support coming to them throw off their income so they won't qualify? How does that get addressed?

DHSS A: We don't acknowledge that one time lump sum. We do work with Child Support Services on this, and we are working on a new design for this aspect of the program, so that this will no longer happen.

If there are issues, contact Belvie Herbert with a case number.

**POC Long Term Strategic Issues**

DHSS explained that eligibility for child care is based on need, including work, training, school, and medical issues. Under TANF you are required to work or be in a work/training program. Whereas, food stamps, you must be participating in a work training. It was noted that most POC participants are working.

Q: If parents lose employment, do they then lose POC?

DHSS A: There is transitional child care, but they may lose their need for POC.

Q: What does POC services associated with the child mean?

A: Leslie Newman noted that in talking with someone from ACF, they noted how states have used this funding source to support programs like ECAP, which is based on family income, not need/employment. They further noted that it is up to our state to determine who we want to use this resource. We are the driver, not ACF. We as a state may need to make a value judgment that these children would benefit from a child care program, but currently we can't do that. However, this could be a policy decision.

Q: Would it be a federal requirement as to what services you pay for?

DHSS A: State would say you invest now or pay later. The state does have the ability to do it, but there may be restrictions on federal or state funds, which maybe a policy decision.

- **DSS will look into the policy restrictions placed by the federal government on funding used for Purchase of Care and report back to the Council for further discussion**

Q: It would be helpful to understand what each of the federal standards are and what are the determinations and why were those determinations made?

DHSS A: We mainly deal with CCDBG/CCDF, which are block grants, which states can design them however they choose within limits. We believe we are following federal structure, modeling, etc.

*Council recommendations:*

- 1. Child based rather than parent based*
- 2. Require providers to reach Star Level 3, over time, to receive POC*

**Screenings**

Currently following Head Start Performance Standards in order to receive ECAP, we are requiring providers to implement hearing, dental, vision screenings within 45 days of program year. A recommendation was discussed to apply the same requirement to providers taking Purchase of Care, however greater discussion is needed due to Licensing and Stars policies.

- **Stars redesign process to consider standards such as screening requirements**

Q: Someone suggested that the DECC health subcommittee can look at screening and assessment and health of children in a different way. Are we maximizing programs to ensure children come to child care settings screened?

A: This is part of the work the health subcommittee is doing already and it aligns with the goals of the CGLR. We are getting data on how many kids are screened, referred, followed up on, etc.

- **DECC Health Committee to look at in greater detail and report back to Council.**

**Consumer Education and Public Awareness Campaign** – Update on plan for roll out after September website release – The agency will consider all recommendations, however further discussion would need to take place prior to moving forward with any of these recommendations. The agency will work with a vendor to develop a marketing campaign for the consumer education website.

*Council Recommendation: We would like to provide feedback on the site that goes up in September and look forward to discussing other communications that are needed beyond a website.*

- **Council will review consumer education website in the fall and offer recommendations for future site development and public awareness efforts.**

It was noted that there is work occurring on a website for adverse childhood experiences. Ideally, the goal would be to have a one stop shop making it easier for families (which is being worked on by Sec. Manning, DSCYF).

It was further noted that the Council relies on the Family Cabinet Council to ensure the agencies are working together. Likewise, DECC has a role to collaborate efforts as well as to coordinate resources.

Q: How do we educate those who serve our families, especially about the social service system?

DHSS A: We have started some internal dialogue on how we will address this.

Regarding children in the child welfare system, if their foster families work full time then do they qualify for POC? If you are a child in foster care and your families' works from home, would they qualify?

DHSS A: In a recent meeting with DSCYF, this issue was raised. We will look at both policies programmatically and fiscally, all while noting fiscal restrictions.

It was noted that it is important that we advocate that these are vulnerable children who need a quality childhood opportunity.

### **Funding/New Resources**

**Quality set aside** - Quality set aside is currently being used to support the training and professional development of the child care workforce (T.E.A.C.H., Relative Care, WECEC), improving the supply and quality of child care programs (Capacity), supporting a statewide system of childcare resource and referral services, supporting compliance with state licensing requirements, and supporting the development and adoption of high quality program standards related to health, mental health, nutrition, physical activity and physical development (EHS-CCP, Behavioral Health Consultation)

**New federal resources** - ACF directed states to use the additional \$6+ million to fund previously unfunded mandates from the 2014 CCDF Reauthorization including: Graduated Phase Out, 12 month eligibility, Criminal Background Checks, Consumer Education Website, Expulsion Policy, Licensing Licensed Exempt Providers, Mandated Health and Safety Trainings, and Disaster Planning.

The agency currently uses the Capacity Grant to incentivize providers who care for children in the categories referenced above and have had some internal discussion about expanding this program.

### ***Council recommendations:***

#### ***Incentives/bonuses for providers to care for***

- 1. Dual language learners***

2. *Infants-toddlers*
3. *Children with disabilities*
4. *Off hours needs*

DHSS asked for more detail on these proposals from the Council, and agreed to discuss and consider them, within the boundaries by what is allowed by the federal government.

**Contracted slots vs how POC is currently done – The agency is open to discuss of the above referenced topic.**

We currently have voucher system, contract with provider for certain number of slots which allows for a steady budgeting for providers so they know cost up front. Someone noted that we could possibly do a hybrid – part contracts/part vouchers. Another suggestion is that nontraditional hours could be piloted (DHSS says this is under consideration).

- **DECC and DSS to hold further discussion about getting better data on off hours needs and providing incentives for this care.**
- **DECC and OEL will present recommendations on how to implement other bonus/incentive options, based on previous infant bonus effort.**
- **DECC Workforce/Programs Committee and OEL will present recommendations on inclusion incentives and support/professional development/TA.**

**Technical Assistance/Professional Development** for providers especially on:

1. Inclusion
2. Challenging behaviors
3. Leadership

*Council Recommendation: Consider inclusion, challenging behavior and leadership*

**Background Check Systems Improvements** – The agency has already committed to utilizing necessary funding to ensure compliance with the new CBC requirement. The agency is open to discussion of the referenced topics.

1. Data systems, including linking across state agencies and establishing a mechanism for collecting expulsion/suspension data
2. Screenings systems and data collection/follow up for referral and services
3. Professional registry for the early childhood workforce

DHSS noted that new funding they received will go to the New Requirements noted in the PowerPoint attached to these notes (and will be in with meeting minutes).

DHSS noted that the recommendations from the Council seem reasonable and can be discussed, and it would be helpful for the Council and OEL to put forward specific proposals so DHSS can run the numbers to see what might be possible.



It was also noted that any comments on the CCDF Plan should be put in writing and submitted before June 18<sup>th</sup>, pending changes to the timeline per the feds.\*

The meeting was adjourned at 12:34pm.

\*Note the federal timeline changed, but Delaware submitted a plan on the original timeline.